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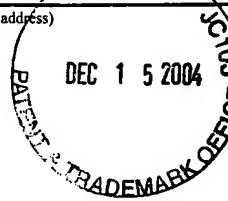
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SUMMA & ALLAN, P.A.
11610 NORTH COMMUNITY HOUSE ROAD
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CHARLOTTE, NC 28277

12/16/2004 MWOLGE2 00000031 10046346

01 FC:1501 1400.00 OP
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VINISHA JOSHI		(Depositor's name)
<i>Vinisha Joshi</i>		(Signature)
Dec. 13, 2004		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/046,346	10/26/2001	Joseph J. Sumakeris	5000.221	2872

TITLE OF INVENTION: MINIMIZING DEGRADATION OF SiC BIPOLAR SEMICONDUCTOR DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330- 1400	\$300	\$1630- 1,700	12/13/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
MUNSON, GENE M		2811	257-077000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Cree, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

DURHAM, NORTH CAROLINA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
 Publication Fee (No small entity discount permitted)
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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **50-0332** (enclose an extra copy of this form).

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *R. Brian Johnson*

Date **12-13-2004**

Typed or printed name **R. BRIAN JOHNSON**

Registration No. **45,951**

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